PATENT APPLICATION FLE DETERMINATION RECORD

Effective October 1, 2000

ilication or Docket Number

8B2701196

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS								HATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE		OR	BASIC FEE	860
TC	TAL CHARGEA	BLE CLAIMS	minus 20-					XS 9⊧		OR	X\$18=	
ANDERENDENT CLAIMS minus 3 =					•			X40=		OR	X80=	i il ja vastuust
MULTIPLE DEPENDENT CLAIM PRESENT							-				070	
As per pre-Amd. (Hold micrey) * If the difference in column 1 is less than zero, enter "0" in column 2							L	+135=		OR	+270=	
CLAIMS AS AMENDED - PART II							7	TOTAL		OR	TOTAL	860
	<u>(</u>	(Column 1)	MENDED	- PAH (Colur		(Column 3) SMALL E			NTITY	OR	OTHER SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=		OR	X\$18=	1
	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+270=	
							L	TOTAL		00	TOTAL	
(Column 1) (Column 2) (Column 3)									, "	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	addi- Tional Fee		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18≔	
	Independent	•	Minus	***		-:		X40≔		OR	X80⊨	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		1	+135=		OR	+270=	
							L	TOTAL	inimensian kantinan i	OR	TOTAL	
ADDIY. FEE										ĮO,	ADDIT. FEE	L
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	a service	HIGH NUM PREVI	HEST HEST OUSLY FOR	(Column 3) PRESENT EXTRA	1 Г	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total	*	Minus	**	1011	z:	1 -	X\$ 9::	FEE		X\$18=	FEE
	Independent	•	Minus	***	· ··········	Ξ	1 }		P	OR		
	FIRST PRESENTATION OF MULTIPLE DEPENDEN				T CLAIN] -	X40=	· · · · · · · · · · · · · · · · · · ·	OR	X80=	-
	4.4 L				ueu :	-		+135∷		OR	+270≔	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **Tif the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." Trie "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												